

HEMI-SYNC Journal

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HEMI-SYNC IN AN INFANT EDUCATION PROGRAM



by Leanne Rhodes, Ph.D.

Leanne Rhodes is an educational consultant in private practice in Modesto, California. In addition to her work with individual client families, Dr. Rhodes trains other professionals in infant and young child assessment techniques, and offers workshops. She has been a member of the Professional Division of The Monroe Institute since July of 1987. Here, Dr. Rhodes discusses her use of sleep tapes and Hemi-Sync as an intervention in her infant education program.

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I operate an infant education program in which I work with the parents of children whose development is delayed or whose future development is at risk. I do periodic assessments, together we (the parents and I) frame specific development-related goals, I suggest appropriate educational interventions, and the parents implement them. Where appropriate and welcomed, a good deal of counseling also occurs around very basic issues having to do with life and death, fears affecting the present and future, and related topics. We meet twice monthly in the children's homes; visits run between one and two hours in length. Some children also receive physical and/or occupational therapy, and speech pathology services.

For several years now, with selected families, one of the interventions has been a sleep tape for the child which is written by me, recorded in the parents' voices, and played each night as the child is falling asleep. All tapes share certain central, highly positive messages which are very repetitive in nature and which address issues of self, attitudes toward "work" and learning, listening skills, and vocalization/talking behaviors. Additional topics (such as pottyng, eating, etc.) are addressed as needed. In past months I have added statements having to do with biological functioning, an

idea which came from Cynthia Pike Ouellette's book, *The Miracle of Suggestion: The Story of Jennifer*.

The need for daytime reinforcement of the target behaviors mentioned on the tapes (using the wording of the tapes) is stressed to the parents. This reinforcement procedure is designed to further our common goals and to define for the child's conscious and unconscious mind the meaning of the ideas contained on the tapes. Such reinforcement also helps to focus the parents' attention on the more positive aspects of their child's behaviors. The idea for sleep tapes originally arose from my readings in the literature on hypnosis, multiple personality research, and my own use of sleep tapes, which I found to be singularly helpful in reshaping my automatic reaction patterns. Later research readings concerning theta production during the hypnagogic period and its association with accelerated learning confirmed my findings.

Through the years, reports from parents regarding the success of the sleep tapes, all of which was anecdotal in nature, has supported my belief in the efficacy of such an approach. I planned to combine sleep tapes with Hemi-Sync music from the *METAMUSIC* series by playing both tapes simultaneously to increase the period of theta production and, consequently, increase absorption by the unconscious of the messages on the sleep tape. To provide a basis for comparison, I initiated the sleep tape alone for a period of approximately two months, then added the Hemi-Sync music to the formulation.

Several questions/problems have arisen, a primary one having to do with the measurement of change in the children involved. I composed a rating scale to elicit the type of data needed. The scale was to be filled out by parents prior to the institution of the sleep tape, following two months of use of the sleep tape alone, and again approximately two months after addition of the Hemi-Sync music.

The scale proved to be too global in nature. Also, parents lacked a solid baseline of "typical" behavior over time against which they could refer. For example, in rating compliance with parental requests, a 14-month-old of any description is going to be different from that same child at 18 or 20 months who is actively asserting his/her independence. The result is a relative measure, with no way to assess what the child's behavior would have been like without the intervention, assuming the sleep tape and/or Hemi-Sync interventions are having a positive effect. If a child is perceived as a terror, would s/he have been an *absolute* terror without the intervention? The same questions can be asked with reference to the effect of the infant program and other interventions, as a whole: How much did what help?

Other problems addressed included parental compliance in terms of: 1) agreement that sleep tapes alone are worth trying; 2) making the tapes; 3) consistent use of them; 4) agreement to use Hemi-Sync; and 5) successful addition of the Hemi-Sync component which requires additional equipment. I often have to supply the tape recorder for use with the sleep tape and in three cases when the Hemi-Sync tapes have been tried, I have had to supply the stereo with detachable speakers and the Hemi-Sync tapes. Some complicating factors are: 1) families leaving the program prior to conclusion—participation is funded through a local/state agency which controls length of participation; 2) broken equipment and/or tapes; 3) fearful reactions of the child to the tape and/or the music—usually overcome given time and various adaptations; 4) children who sleep on their sides, and thus

are presumably deprived of the binaural Hemi-Sync effect; and 5) children sharing a bedroom with a sibling who objects to use of the tape, even though it was written to accommodate both of them.

The above may suggest that I have thrown up my hands in confusion and disgust. This is not true. I am currently compiling references on single case study methodology and analysis. I am revamping the information provided to parents regarding sleep tapes and Hemi-Sync in an effort to engender greater commitment, consistency, and implementation. I continue to collect anecdotal data.

As an additional point of information, all families who have agreed to use the sleep tape, and to whom I have suggested the use of Hemi-Sync, have accepted my offer. I expect that this acceptance will hold true in the future. Some refuse to consider use of the sleep tape, or, though they verbally agree to the procedure, somehow never succeed in actually making the initial tape. I suspect an underlying fear at the base of this behavior. A few have refused to consider use of the sleep tape, usually with comments to the effect that they are philosophically opposed to interfering with or attempting to influence the functioning of their child's subcon-

*Additional growth in receptive and expressive
speech was noted, more than . . . ever before . . .*

scious. In these cases, parental educational levels have no predictive significance. Fundamentalist religious beliefs may play a determining role in the decision-making process.

The sleep tape/Hemi-Sync regimen has been used with three families thus far. Three other families are "in preparation." Observations of the three current families using this combined approach have reinforced my belief that sleep tape/Hemi-Sync interventions induce effects deserving of a great deal of further attention. However, none of these observations are conclusive and cannot be described as meeting the requirements for "hard data." Observations of two current families are described below. The third case is also worthy of mention but because this child's records are temporarily unavailable to me and I don't wish to rely on memory, I shall save remarks for a later date.

The first case involves a 2.5-year-old whose attention was often very difficult to focus, who verged upon a clinical diagnosis of hyperactivity, and who was delayed in all developmental domains. The sleep tape alone was introduced about March 27, 1989. After one to two weeks, the sleep tape broke. The child's babysitter, who was aware that a sleep tape was being used but who was not informed of its breakage, remarked to the child's mother that she must not have been getting her sleep tape lately because her behavior had deteriorated in so many ways (less calm, less apt to listen, harder to get to settle down—noted approximately mid-April).

A new sleep tape was soon made and its use instituted, again, without the knowledge of the babysitter. In early May she commented to the mother that she supposed the tape to be in use again because the child's behavior had improved noticeably. In early June, the Hemi-Sync tape was added, but without *separated* dual speakers. One month later, use of

separated speakers began, but, unknown to me, the Hemi-Sync tape was played *following* the sleep tape. The child's practice was to lie quietly during the entire sleep tape (observation revealed that she was participating in the deep breathing instructions at the beginning of the tape) and then call her mother at its end so that she could start the *METAMUSIC* tape. By late July, an evident increase in pointing to and naming of requested pictures occurred (sleep tape use *followed* by Hemi-Sync). In early August, *simultaneous* use of the tapes began. Additional growth in receptive and expressive speech was noted, more than had ever before been observed.

This pattern continued throughout the next month (at which point program participation ended), including blossoming of imitative speech, much calmer general behavior, and much more focused attention. In terms of formal assessment, in a period of slightly less than five months, this child made an eight-month gain in terms of gross motor skills as measured by the Bayley Motor Scale. During the same general period of time, fine motor skills (as measured by selected items from the Bayley Mental Scale) increased approximately 12.5 months.

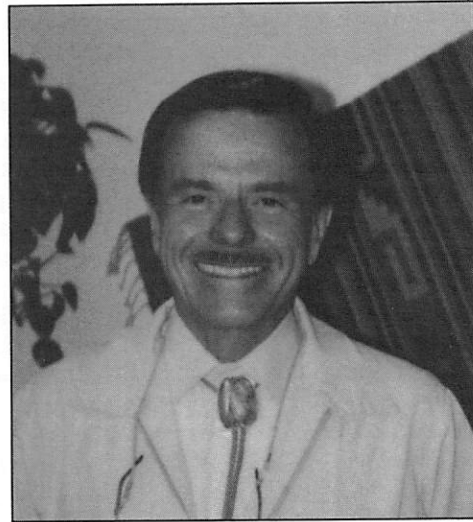
However, beginning in early July and ending in early August, this child's phenobarbital dosage was decreased, with the last dosage occurring August 7. Although the overall medication effects on behavior may have been minimal (i.e., at 2.75 years she was receiving the same dosage as had been prescribed at 12 months of age), the degree to which this factor may have influenced the positive changes in behavior described above is unknown.

The second case deals with a family who used the sleep tapes, and later, the sleep tape and Hemi-Sync combined. Difficulties with equipment, broken tapes, and a mother experiencing a very difficult pregnancy resulted in sporadic use. The child, who exhibited moderate cerebral palsy, was able to walk with difficulty. At termination of the program when she was three years old, she exhibited a high degree of verbal fluency.

More important to this discussion are the spontaneous comments made at this time by her preschool teacher to this child's mother (preschool serves normally developing children): "She [the teacher] was amazed at her attention span, her ability to listen to and follow directions, her desire to do what pleases, and the effort she is willing to expend to master activities that are hard or challenging for her." It is interesting to note that these were among the primary issues addressed in all of her many sleep tape revisions. Also of interest is that her control issues (i.e., assertion of independence) had often made family life less than smooth which emphasizes the need in any evaluative process for input from other than family members regarding change.



MULTIPLE USES OF HEMI-SYNC IN CLINICAL MEDICINE



by Ralph J. Luciani, D.O., M.S., Ph.D.

Ralph J. Luciani is founder and medical director of The Albuquerque Clinic for Pain, Stress & Health Rehabilitation in New Mexico. Established in 1988, the clinic utilizes a multidisciplinary approach to the treatment of chronic diseases and pain syndromes, and the practice of clinical preventative medicine. Dr. Luciani offers this report on the application of Hemi-Sync for chronic pain, smoking dehabituating, dental analgesia, surgical patients, and with other therapies. The Albuquerque Clinic, represented by Dr. Ralph Luciani and Karen Luciani, M.S., has been a member of the Professional Division since 1988.

At the Albuquerque Clinic, we focus on assisting individuals to make transformational shifts from thinking about physical infirmity solely as a physical phenomenon to self-realization of the inner potential of spirit and mind. Since my *GATEWAY VOYAGE* at The Monroe Institute in the summer of 1988, I knew that the Hemi-Sync process would play a major role in my practice because of its tremendous potential for effecting transformational change. It seemed to me that the process was able to aid people to get "unstuck," and out of thinking of themselves as victims of their physical realities. My wife, Karen, followed me one month later to her *GATEWAY VOYAGE*. It stimulated such a profound change in her thinking that she continued her training to be a *GATEWAY OUTREACH* Trainer. She now leads bimonthly Hemi-Sync Excursion Workshops given at our Clinic for patients and other community members.

HEMI-SYNC FOR CHRONIC PAIN

One of the major uses of Hemi-Sync is in our comprehensive pain program. The clinic offers a two-week intensive

pain program whereby the patient spends most of the day at the clinic seeing various practitioners for therapy. About two to three hours per day is spent in Hemi-Sync biofeedback therapy.

Patients are given a handbook which guides them through their two-week program. A schedule of Hemi-Sync tapes is included. The program is designed to lead patients through an evolution of consciousness during the physical aspects of their therapy. During each tape, a thermistor is attached to a finger to track temperature changes as an indication of the relaxation response. This method is also used for other relaxation tapes which do not include Hemi-Sync. However, we are using a Hemi-Sync synthesizer wired into the Clinic stereo system which allows us to play non-Hemi-Sync tapes, and add the appropriate Hemi-Sync signal. The patient's headset is plugged into the wall, and the patient relaxes in a lounge chair for the tape sessions. Each patient also gets homework tapes daily, and a sleep tape each night.

The results have been quite astounding. One patient was very resistant to the concept of the tapes, but continued to listen to them as directed. She admitted that, although she thought it sounded like "crazy stuff," the tapes helped her to get pain relief and to relax. After her program was over, she purchased several tapes for herself. At follow-up visits she told me that at the end of a stressful day, she listens to a tape and has been able to prevent her back from hurting.

Another individual, a Vietnam veteran, was suffering from a work-related injury of two years' duration. He also had a

... a Vietnam veteran ... [with] a history of PTSD ... received insights into some of the factors which prevented him from letting go of his pain.

history of Posttraumatic Stress Disorder (PTSD). During his Hemi-Sync therapy, he received insights into some of the factors which prevented him from letting go of his pain. Several scenarios from his Vietnam days were revealed to him which helped him understand himself better and feel more relaxed. Within three days of the beginning of his two-week program, all of the therapists remarked how this patient had already changed. He was physically less tense. His face was softer, more cheerful, and less stressed. He attended a *GATEWAY OUTREACH EXCURSION* workshop in which he further explored his emotional and physical pain.

With all of our cases in which the temperature thermistor is used for biofeedback, the use of the Hemi-Sync process has been shown to effect dramatic increases in skin temperature. As an example, the first patient discussed above had a formal biofeedback session on day one. Her temperature actually dropped, indicating increased tension. On day five she had a second formal session. She was able to raise her skin temperature over 10 degrees Fahrenheit. The biofeedback therapist was amazed. During those five days, the patient experienced Hemi-Sync two to three hours daily, using the skin temperature device. Her autonomic control was dramatically enhanced.

HEMI-SYNC FOR SMOKING DEHABITUATION

Another area of practice in which Hemi-Sync has proven to be very successful is in aiding patients to stop smoking. Our

smoking program consists of behavioral counseling, a choice of acupuncture or hypnotherapy treatment, and the daily use of the Hemi-Sync *Dehab Smoking* tape. On the first visit, the patient is given several behavioral tips to help prevent the learned triggers for smoking, and the tape to begin using daily. The patient is told to set his/her own date as the "quit day," and to decide whether to undergo acupuncture or hypnotherapy on that day. The treatment program is carried out and the patient continues to listen to the tape at least once,

All of our patients have successfully quit smoking ...

either during the day or at bedtime. All of our patients have successfully quit smoking and all report that the tape is a key factor. The tape is also something they can review when necessary to reinforce their belief that they are indeed nonsmokers.

DENTAL ANALGESIA

A local dentist who utilizes a very eclectic range of treatment methods has referred patients to me for assistance with dental analgesia. My program consists of giving the patient the *Pre-Op* tape from the *EMERGENCY SERIES* to listen to daily for one week prior to the procedure. During the dental procedure, the *Intra-Op* tape is played and acupuncture is administered for analgesia. I have treated three patients to date using this procedure.

The first patient was an R.N. who had tremendous fear of dental pain and didn't want injectable analgesia. The patient had both an inlay and a crown procedure. Both procedures are considered extremely uncomfortable. She experienced no pain and felt totally relaxed and happy during and after her procedure.

The second patient had a previous negative experience in the dental chair with an acute hypertensive episode accompanied by agitation requiring paramedic assistance. It was unclear whether the episode stemmed from extreme fear and anxiety, or was a reaction to the local anesthetic. Regardless, it was evident an alternative was needed. She was to have some very extensive work. A three-unit bridge and inlay, and a four-unit bridge were all to be accomplished during two separate visits. During both visits, the same treatment with Hemi-Sync and acupuncture was used. The patient had one

She experienced no pain and felt totally relaxed and happy ... during and after her procedure.

area in her right anterior mandible which remained a bit sensitive, but she endured on both visits with minimal discomfort and no agitation. She reported she did not want her earphones removed even after the acupuncture was discontinued. She noted that the tape helped her to feel at ease and detached from discomfort.

The third patient was a very environmentally sensitive woman who could not tolerate drugs or anesthesia of any

kind and needed several fillings. She, too, did well and had minimal to no discomfort during her procedure.

HEMI-SYNC FOR SURGICAL PATIENTS

We have had two patients who required surgery and who used the *EMERGENCY SERIES*. The *Pre-Op* tape was given three to five days prior to surgery for daily listening. One hysterectomy patient was able to listen to the *Intra-Op* tape during her surgery. In the recovery room and for several days thereafter, the *Recovery* and *Recuperation* tapes were played daily.

The hysterectomy patient required minimal self-administered analgesia the first day and virtually no medication on the second day. The nursing staff encouraged the patient not to be stoic and to use medication when she felt pain. However, the patient insisted she had little or no discomfort. She was discharged on the third day.

The second patient, diagnosed with a ruptured disc, underwent a lumbar laminectomy. She reported very little need for pain medication after the procedure and was released from the hospital much sooner than expected. She was very pleased, as was the hospital staff, at her fast recovery rate.

HEMI-SYNC DURING OTHER THERAPY

Hemi-Sync *METAMUSIC*, and other tapes used with the synthesizer, are also played during massage therapy, acupuncture treatments, and relaxation training in our Clinic. During massage therapy, Hemi-Sync over open speakers not only allows the patient to relax, but reportedly supports the therapist in achieving a deeper insight into the patient's problems. During acupuncture, patients reach a deeper state of consciousness which enhances the energetic acupuncture therapy.

CONCLUSION

The use of the Hemi-Sync process has proven to have significant clinical use for various problems from pain management to relaxation therapy. Its uses are limited only by our lack of application. Wherever and whenever the integration of body, mind, and spirit is a therapeutic goal, Hemi-Sync can be of invaluable assistance.



HEMI-SYNC JOURNAL is a publication of the Professional Division of The Monroe Institute. Its purpose is to provide a vehicle for professionals' reporting on their innovation and application of the Hemi-Sync technology in their fields. The Monroe Institute is a 501(c)(3) non-profit research and educational organization dedicated to exploring and developing the uses and understanding of human consciousness.

EFFECTS OF HEMI-SYNC WITH ART STUDENTS IN CLASS



by Jacqueline Penney

Artist and art teacher Jacqueline Penney has owned and operated the Penney Art Gallery and Studio in Cutchoque, New York, since 1982. Subsequent to her participation in the GATEWAY VOYAGE program at The Monroe Institute, Ms. Penney implemented the use of Hemi-Sync as an audio environmental enhancement during her teaching classes. The following summary of the results of the effects of Hemi-Sync with students in her painting classes was compiled with the aid of her husband, Kenneth G. Moore. Ms. Penney has been a member of the Professional Division since November of 1989.

This study of the effects of Hemi-Sync on my art students was done between January 17 and February 8, 1990. Four classes in acrylic painting were held on Wednesdays from 9:30 A.M. to 3:30 P.M. and four classes in watercolor painting were held on Thursdays from 9:30 A.M. to 3:30 P.M.

Hemi-Sync was not used the first week or the third week, but was used the second and fourth weeks. A model #202 synthesizer was connected through the stereo cassette player. The speakers were on either side of the main room. When attendance required it, an adjoining room was used with no separation between.

Students who have studied with me before are considered "old" students (signified by O) and students who were joining this class for the first time were considered "new" (signified by N).

Students were asked to complete preclass and postclass questionnaires. Students rated their levels of comfort/anxiety, and physical/mental/emotional fatigue on both pre- and postclass questionnaires. The rating scale was numbered from 1 (no anxiety/high energy) to 10 (high anxiety/low energy).

The number of students did vary each week. Also, one of my students who took both classes each week suffers from Lyme disease. Her physical condition and mood swings are typical of that disease and her responses tend to be more negative than the rest.

- The first week of classes I tuned the radio to a local station playing pop music.
- The second week I used the Hemi-Sync with classical CDs.
- The third week I played classical music without the Hemi-Sync.
- The fourth week I used the Hemi-Sync with classical CDs.

There is always high anxiety on the first day of any class. As the students become more familiar with the medium and the subject they are painting, they automatically become less anxious. I feel that watercolor instruction produces a higher rate of anxiety than acrylic because of its very nature. It is difficult, unpredictable, and unforgiving. This is not apparent when reading the numbers and, therefore, may be a projection of mine as I find it a difficult medium to teach. Also, I had thought the results would indicate an overwhelming difference in favor of classical versus popular music. They did not!

SUMMATION OF DATA

Rating Scale: from 1 (No Anxiety/High Energy) to 10 (High Anxiety/Low Energy)

All the students in acrylic classes:

- 4.1 Preinstruction
- 3.2 Postinstruction without Hemi-Sync
- 2.8 Postinstruction with Hemi-Sync

All the students in watercolor classes:

- 3.8 Preinstruction
- 3.5 Postinstruction without Hemi-Sync
- 2.9 Postinstruction with Hemi-Sync

All the "old" students in acrylic classes:

- 4.1 Preinstruction
- 2.0 Postinstruction without Hemi-Sync *
- 2.6 Postinstruction with Hemi-Sync

All the "old" students in watercolor classes:

- 3.6 Preinstruction
- 4.1 Postinstruction without Hemi-Sync
- 2.5 Postinstruction with Hemi-Sync

All the "new" students in acrylic classes:

- 4.1 Preinstruction
- 5.0 Postinstruction without Hemi-Sync
- 3.3 Postinstruction with Hemi-Sync

All the "new" students in watercolor classes:

- 4.0 Preinstruction
- 2.9 Postinstruction without Hemi-Sync *
- 3.4 Postinstruction with Hemi-Sync

The GRAND TOTAL in both classes:

- 4.0 Preinstruction
- 3.1 Postinstruction without Hemi-Sync
- 2.9 Postinstruction with Hemi-Sync

*After looking at these figures, it appears that in two instances, indicated with an asterisk, the numbers were lower without Hemi-Sync.

Overall, however, the results indicate that Hemi-Sync had a substantial influence on the students in lowering their anxiety.

RESULTS OF USE OF HEMI-SYNC TAPES AND SYNTHESIZER AS SUPPORT FOR PERSONAL COUNSELING AND THERAPY



by Susan Cord

Susan Cord is director of the South Bay Body-Mind Connection in Redondo Beach, California, a holistic center offering individual therapies and workshops. Ms. Cord utilizes Hemi-Sync tapes and a synthesizer extensively with clients during and after treatment and instruction. In cooperation with Hildegard Minstein, Ms. Cord describes several areas of Hemi-Sync application. Susan Cord has been a Professional Division member since 1989.

Through the South Bay Body-Mind Connection, I have used the Hemi-Sync technology for three years in conjunction with my work as a Reiki and Seichim teacher and master therapist. Reiki and Seichim are techniques for directly interacting with the subtle body energy systems of a client. Hemi-Sync is applied in the following ways:

1. The Hemi-Sync synthesizer is introduced during Reiki and Seichim classes to heighten students' perceptual levels, thereby increasing their levels of retention. The Hemi-Sync signals are fed through two speakers positioned in front of the class. Students report experiencing:
 - less nervous tension during class;
 - less distraction during the learning period;
 - more ability to visualize the information presented after the class is concluded.
2. The Hemi-Sync synthesizer is used in class during the lecture sessions. Tapes produced by Meredith Lady Young entitled *Intuition*, *Spiritual Questing*, and *Love* are used during the guided meditation exercise in the class. The syn-

thesizer signals and the Young tapes are played through two speakers placed in front of the class. Students report:

- increased ability to visualize during the meditation;
- greater recall of the level of awareness during meditation;
- ability to reproduce the meditational state later;
- a profound physical sense of what Reiki and Seichim "feels" like to the physical body when it is received.

3. The Hemi-Sync synthesizer, set for delta/theta, is fed through headphones to the client during personal and spiritual counseling. Additionally, Hemi-Sync *METAMUSIC Midsummer Night* and *Surf* tapes are played through speakers to provide audio enhancement for the therapist during sessions. Results reported by clients include:

Client A, a female attorney, age 48, is a self-described metaphysical seeker. She reports experiencing what she perceives as whole-brain integration during counseling sessions. For support between sessions she was given delta/theta tapes recorded from the synthesizer. After several sessions, she reported the ability to sustain this whole-brain integration in the performance of daily tasks as well as in meditation.

Client B, a male engineer, is a *GATEWAY VOYAGE* graduate. He desired to continue using Hemi-Sync technology and incorporate it with the study and practice of Reiki and Seichim as an aid to his spiritual growth. He reports that combining the modalities has, in his opinion, greatly enhanced his ability to visualize spiritually. For the first time in his life he says he is actually "seeing" his meditations. He further reports that, while using various Hemi-Sync tapes during self-treatment with Reiki and Seichim, he can actually see colors associated with the treatment.

4. Other ways the Hemi-Sync technology has been used with great success at South Bay Body-Mind Connection include:

- teaching stress reduction;
- controlling eating disorders;
- as an aid to pregnancy massage;
- as an aid in prebirth instruction;
- in past-life therapy.

HEMI-SYNC JOURNAL SUBSCRIPTION/MEMBERSHIP

The HEMI-SYNC JOURNAL is sent quarterly to members of The Monroe Institute. In return for their support of TMI, members also receive quarterly special-release audio-cassette tapes, and the TMI FOCUS, highlighting the programs, activities, people, releases, and events that track the evolution of the Institute. Benefits also include reduced member prices on products developed by The Monroe Institute and Interstate Industries, Inc.

If you are not already a member and would like more information on the membership benefits, please call or write The Monroe Institute: (804) 361-1252.

BRAIN INJURY RECOVERY WITH HEMI-SYNC



JoHanna Hawthorne, M.A.

The following article is excerpted from a book in progress by JoHanna Hawthorne and Susan Anton-Johnson. Permission has been granted by the authors to publish this material in the HEMI-SYNC JOURNAL. It is with deep appreciation that we offer this account of Ms. Hawthorne's struggle with the effects of "closed head trauma" and her courageous path to recovery.

In January 1984, I was involved in an automobile accident. Although the car was "totalled," I was released from the hospital after only a quick examination. There were no broken bones, lacerations, or loss of consciousness. My symptoms of concussion were dismissed.

Within seven months I was fired from my job due to unacceptable performance. I dropped out of school because I couldn't do the work. Friends disappeared and my relationship of over a year ended. What happened?

I didn't know. I cried often and uncontrollably. For no reason, the tears just flowed. And I just sat. It was impossible to concentrate or remember anything I read, even newspapers or magazines. Television was incomprehensible. During my conversations, other people got glazed looks in their eyes and made fast exits. Watching all this happen, I was unable to understand what was wrong. It was like a movie of someone else's life. Getting lost going to the store, being angry a lot, and forgetting how to cook, shop, or wash clothes was commonplace. I was in a fog. I knew there was a world out there and that there was a problem, but I had no idea that I could or needed to fix anything.

After a year of this, I finally saw a neurologist. He ran three days of painful tests and, when the results were in, carefully explained the findings. My brain had been organically bruised and damaged from slamming around inside my skull as a result of the severe jolts it had received in the acci-

dent. He called my injury "closed head trauma" and prescribed medication to stabilize the mood swings and to help me think more clearly.

I fought taking the medication but could not operate without it. With its help, I began to see that the world was crumbling around me. My confusion began to clear. I realized that something was wrong. I needed to change it and put my life back together.

The reason people left my life was now clear. I looked okay, but no longer made sense. In conversation, the words in my head were not the same words that came out of my

*A . . . psychiatrist diagnosed a permanent
impairment of 42% . . .*

mouth. I hadn't realized that.

I discovered something else, too. The accident had left me operating with the social graces, and at the emotional level, of a four-year-old. Thus, the mood swings: happy one minute, sad or angry the next. I also had a short attention span and was extremely self-centered. A consulting psychiatrist diagnosed a permanent impairment of 42%, with 30% to my intelligence. However, like a stubborn four-year-old, I refused to accept it and vowed to get better. I accepted that I was brain injured, but refused to allow that injury to determine the way I lived the rest of my life.

My search began for tools that would help me to make positive changes. Once I opened to the possibility of doing more, and began to talk about some of my problems, people offered suggestions of resources, tapes, and readings that might help. It was as though, once I agreed to be healthy, opportunities arose to make it happen.

That's how I discovered the Hemi-Sync tapes. Someone had seen an ad for Hemi-Sync tapes in a New Age magazine and brought me the information. I immediately ordered some tapes.

Six years after my accident, I started using Hemi-Sync tapes from the *HUMAN PLUS* series. Friends from my support group began noticing changes. They said, "In the last two or three weeks, you've been so much brighter. You've had more energy. You've been so much quicker. Why, you're making jokes left and right." When I told a joke at work one

*Six years after my accident, I started using
Hemi-Sync tapes . . .*

day, a co-worker said, "Don't tell me you're brain damaged if you can make a remark that fast." Back at my desk, I realized that I'd been using the *HUMAN PLUS* tape *Brain: Repairs & Maintenance*, and obviously it was working. At that point, I contacted The Monroe Institute to tell them how effective their tapes were in my healing process.

The people who noticed the difference in me didn't know about the tapes. They were remarking on my brightness and

quickness. Until others noticed the changes, I hadn't realized that I was improving.

When it was brought to my attention, I asked myself, "What's different?" The only difference was listening to the tape every night. I was sleeping better, things were going more smoothly, and I experienced various breakthroughs. At times I'd think, "Oh, I handled this much better now. I'm doing this easier now." It wasn't a case of listening to the tape one day and the next day saying, "Oh, I listened to the tape last night and now look how good I am." It was an ongoing process rather than a dramatic, overnight change.

With the help of new study methods, I've returned to school and earned my masters degree in Learning and Human Development Technology. A friend encouraged me to study NLP (neuro-linguistic programming) training, so I am now a certified NLP practitioner and hypnotherapist.

Part of knowing our capabilities is to do something that normally seems out of our scope of possibility. At the end of the NLP training, I was given an 11" x 12" x 3/4" thick board and told to break it with my hand. Methods of concentrating and focusing to see my hand beyond the board were demonstrated. Previous study of Tai Chi also helped me to

*. . . I've returned to school
and earned my masters degree . . .*

concentrate. In a single swipe, I broke the board. And didn't hurt my hand at all! I experienced an unparalleled sense of power and assurance never before felt. I knew then that, as I had broken the board, I could do anything I set my mind to—and succeed.

The Hemi-Sync tapes have helped in retraining my brain and recovering lost abilities to concentrate and think clearly. By practicing intensely, I've recovered my gift of music, lost at the time of the accident. Today, through words and song, I share my story at every opportunity with churches, businesses, clubs, schools, and PTAs, whenever I am asked to speak. My Higher Power has provided the opportunity to put my energy into healing and talking about my recovery. Like others in recovery, I work on healing each day, one day at a time.

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